RECEIVED	CLERK
----------	-------

Name: ROBERT ELLIS JONES U-155 PHENT BART Address: P.O. BOX 250 DRAPER UTAH 84020-0250

JUN 2 6 2006

Telephone:

2005 JUN 20 A 9: 87

U.S. DISTRICT COURT

DISTAUGT OF UTAIL

UNITED STATES DISTRICT COURT-FOR THE DISTRICT OF UTAH CENTRAL DIVISION

ROBERT ELLIS JONES

(Full Name)

PLAINTIFF

CIVIL RIGHTS COMPLAINT

(42 U.S.C §1983, §1985)

VS.

STATE OF UTAH.

DEPT OF CORRECTIONS

UTAH STATE PRISON/

MEDICAL DEPT.

M.D. RICHARDGARDEN.

P.A. PAUL ROSSER

P.A. KENNON TUBBS

M.D. PRAMOD SHARMA

et., al.

Judge Dale A. Kimball

DECK TYPE: Civil

DATE STAMP: 06/30/2006 @ 09:13:34 CASE NUMBER: 2:06CV00527 DAK

DEFENDANTS

A. JURISDICTION

 Jurisdiction 	is proper	in this	court according to:
----------------------------------	-----------	---------	---------------------

a. **X** 42 U.S.C. §1983

b. ___ 42 U.S.C. §1985

c. __Other (Please Specify)

2. NAME OF PLAINTIFF ROBERT ELLIS JONES
IS A CITIZEN OF THE STATE OF UTAH

PRESENT MAILING ADDRESS: P.O. BOX 350 DRAPER, UTAH 84020-0250

3. NAME OF FIRST DEFENDANT M.D RICHARD GARDEN

	IS A CITIZEN OF DRAPER, DIAH
	(City and State) PHYSICIAN IS EMPLOYED AS MEDICAL DEPT. at PRISON. (Position and Title if Any) (Organization)
	Was the defendant acting under the authority or color of state law at the time these claims occurred?
	YES X NO If your answer is "YES" briefly explain.
	M.D. RICHARD GARDEN IS THE HEAD OF THE
	MEDICAL DEPT. AT THE UTAH STATE PRISON
	AND DENIED MY COMPENSATION REQUEST 26 JAN,06.
4.	NAME OF SECOND DEFENDANT PAUL ROSSER (If applicable)
	IS A CITIZEN OF <u>DRAPER, UTAH</u> (City and State)
	IS EMPLOYED AS PHYSICIANS ASSIST. at PRISON. (Position and Title if Any) (Organization) Was the defendant acting under the authority or color of state law at the time these claims occurred?
•	YES X NO If your answer is "YES" briefly explain.
	ON OR ABOUT 20 AUGUST 2004 DEFENDANT
	PAUL ROSSER EXAMINED MY SCALP AND STATED
	THAT IT (LESION) LOOKS LIKE CANCER.
5. .	NAME OF THIRD DEFENDANT KENNON C. TUBBS (If applicable)
	IS A CITIZEN OF DRAPER, UTAH (City and State) UTAH
	IS EMPLOYED AS PHYSICANS ASSIST. at PRISON (Position and Title if Any) (Organization)

Was the defendant acting under the authority or color of state law at the time these claims occurred?

YES X NO..... If your answer is "YES" briefly explain.

ON 17 SEPTEMBER, 2004 DEFENDANT TUBBS

DID TAKE A BIOPSY OF WHAT WAS SUSPECTED AS

AS CANCER AT THE PROMONTORY MEDICAL ROOM. SPECIMEN WAS SENT TO SEATTLE, WASHINTON. FOR TESTING!

NAME OF FOURTH DEFENDANT PRAMOD K. SHARMA 6. (If applicable)

IS A CITIZEN OF SALT LAKE CITY, UTAH

(city and State) M.D., F.A.C.S.

UNIVERSITY OF UTAH MEDICAL CENTER

IS EMPLOYED AS HEAD AND NECK SURGEON HUNTSMAN CANCER INSTITUTE.

(Position and Title if Any)

(Organization)

Was the defendant acting under the authority or color of state law at the time these claims occurred?

YES K NO . If your answer is "YES" briefly explain.

ON NOVEMBER 16, 2004 DEFENDANT SHARMA

PERFORMED AN EYEBALL EXAM ON MY SCALP

TO CONFIRM SUSPECTED MELANOMA AT HUNTSMAN. TIME, BENIFIT OF SURGERY EXPLAINED. (Use additional sheets of paper if necessary.)

B. NATURE OF CASE

1. Why are you bringing this case to court? Please explain the circumstances that led to the problem. FROM AUGUST THRU DECEMBER 2004, MEDICAL CARE PROVIDERS AT THE UTAH STATE PRISON/et, a. LED ME TO BELEIVE, AND CONTINUE TO TRY AND CONVINCE ME THAT MY LIFE WAS IN DANGER FROM MELANOMA AND SURGERY WAS NEEDED TO REMOVE MELANOMA FROM MY SCALP.

C. CAUSE OF ACTION

- 1. I allege that my constitutional rights, privileges or immunities have been violated and that the following facts form the basis for my allegations: (If necessary you may attach additional pages)
 - a. (1) Count I: NEGLIGENCE OF LEGAL DUTIES.
 - (2) Supporting Facts: (Describe exactly what each defendant did or did not do. State the facts clearly in your own words without citing legal authority or arguments.)

ALL PARTIES INVOLVED IN THIS ACTION

FAILED TO CONFIRM WITH 100%

CERTAINTY THAT A SUSPECTED LESION

ON MY SCALP WAS NOT MELANOMA AS

REPORTED FROM LAB IN SEATTLE, WASH,

MELANOMA CLINIC AT (UCSF) UNIVERSITY

REPORTED NOT MELANOMA AS THE

- b. (1) Count II: LACK OF PROPER MEDICAL CARE

 DELTBERATE TAIDTEEFRENCE
 - (2) Supporting Facts: DEFENDANTS AS PHYSICIANS
 HAVE A LEGAL DUTY TO PROVIDE ADEQUATE

 CARE TO PATIENTS. DEFENDANTS HAVE

 NEGLECTED TO MEET THIS DUTY IN A

 REASONABLE AMOUNT OF TIME AND THUS

 CAUSED PLAINTIFF TO REMAIN IN PAIN.
- c. (1) Count III: PERMANENT DISFIGUREMENT.

	(2) Supporting Facts: ON DECEMBER 2, 1009 1
	UDERWENT A SURGICAL PROCEEDURE
	TO REMOVE A SUSPICIOUS LUMP ON MY
	SCALP THAT WAS IDENTIFIED AFTER
	SURGICAL PROCEEDURES-NOT MELANOMA
	BUT A MELANOCYTIC NEVUS, OR A MOLE.
	<u>D. INJURY</u>
1.	How have you been injured by the actions of the defendant(s)?
•	I AM STILL TO THIS DAY BEING TOLD BY
	MEDICAL STAFF THAT I DID HAVE A
	MALIGNANT MELANOMA. HOWEVER
	THE FINAL SURGICAL REPORT SAYS
	OTHERWISE. DUE TO THE SIZE OF
	THE HOLE IN MY SCALP I AM VERY
	SELF CONSCIOUS OF THIS IN PUBLIC.
	E. PREVIOUS LAWSUITS AND ADMINISTRATIVE RELIEF
1.	Have you filed other lawsuits in state or federal court that deal with the same facts that are involved in this action or otherwise relate to the conditions of your imprisonment YES/NOX If your answer is "YES," describe each lawsuit. (If there is more than one lawsuit, describe additional lawsuits on additional separate pages, using the same outline.)
	a. Parties to previous lawsuit:
-	Plaintiff(s):
	b. Name of court and case or docket number:
	o. Traine of court and case of docket number.

	c.	Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?)
	d.	Issues raised:
-		
	e.	When did you file the lawsuit?
	•	
	f.	When was it (will it be) decided?
2.	admir I If you	you previously sought informal or formal relief from the appropriate histrative officials regarding the acts complained of in Part C? YES * / NO _ f your answer is "YES" briefly describe how relief was sought and the results. It answer is "NO" explain why administrative relief was not sought. FILED(3) 5 EPARATE GREIVANCES, 1. REQUESTING
	To	BE COMPENSATED FOR THE DISFIGUREMENT OF
	WA	HEAD (REFERENCE; # 990860670) AND THE SECOND
	GR	ETVANCE (REFERENCE # 990 860061) FOR THE LACK
	OF	PROPER MEDICAL CARE, BOTH MATTERS WERE
	DEN	VIED, DIRECTING ME TO SEEK FUOTER REMIEDY.
		F. REQUEST FOR RELIEF
1.	I belie	eve that I am entitled to the following relief:
	TO	BE COMPENSATED IN AN AMOUNT TO BE
	DE	CIDED BY A JURY FOR DISFIGUREMENT
	(PT	ERMANENT) AND NEGLIGENCE. AND WITH
	NO	FUTURE LIABILITY OF MEDICAL EXPENSES
<u>I</u>	NCUR	RED WHILE INCARCERATED.

DECLARATION UNDER PENALTY OF PERJURY

The undersigned declares under penalty of perjury that he/she is the plaintiff in the above action, that he/she has read the above complaint, and that the information contained therein is true and correct. 28 U.S.C. §1746; 18 U.S.C §1621.

Executed at <u>W.A. 303 B</u> (Location)

Light Ellishnus

Page 8 of 54 Case 2:06-cv-04 Document 3 Filed 06/30



Pramod K. Sharma, M.D., F.A.C.S.

Assistant Professor Otolaryngology - Head and Neck Surgery Head and Neck Surgery Oncology Head and Neck Reconstruction



November 16, 2004

Dr. Tubbs Utah State Prison Department of Corrections PO Box 250 Draper, Utah 84020

Robert Jones RE:

ENT: 89689 MRN: 05051255

Dear Dr. Tubbs,

I had the pleasure of seeing Robert Jones today in consultation. Mr. Jones is a 42 year old male with a history of a scalp lesion. He underwein a hippsy on approximately 9/17/04. This was evaluated and there was a question as to whether this was a henigo or malignant lesion. Examination at the Dermopathology Laboratory at the University of - ZYE EXAM Utah School of Medicine confirms this to be a malignant melanoma, with invasion to at least 0.75 mm. The patient demes any family history of malignant melanoma. His past medical history is significant for chronic back pain, with a history of a diskectomy for a herniated disk. He smokes approximately one-half pack a day for 25 years. He no longer consumes alcohol products.

Physical Examination: Evaluation of the scalp reveals a raised oval lesion that is approximately 1.5 cm. in diameter in the vertex on the right side of midline. There are no other abnormalities of the scalp. Palpation of the neckreveals no lymphadenopathy. The remainder of the head and neck examination was essentially normal.

In summary, Mr. Jones has a malignant melanoma of at least 0.75 mm. thickness, without ulceration (deep margin positive). This lesion represents a probable intermediate risk and therefore I have recommended lymphoscintigraphy to identify sentinel node, with sentinel node biopsy. I have also recommended wide local excision with 2 cm. margins and a split thickness skin graft. I have explained the procedure in detail to the patient including all risks and benefits and he has consented. This will be scheduled in the near future.

Thank you for allowing me to be involved in the care of this patient. I will keep you informed as to his progress.

Sincerely,

Pramod K. Sharma, MD. FACS

Assistant Professor

n i josefin na 190 ili plese je izvije se PKSfewers to on the sign course coursely and the residence and of so absorbed this section of the fewer than the Physical Examination. Contention of the reals consell a correct one berief that is approximately 1.5 cm, in thamber

position constant in the part income the a history of a out-extensy for a hydranica and the condensation approximately one had puch undey for 25 grains. He an denies any landy history of ambiguest archeroans. All year endicat bintory is significant for chronic back national Usan School of Medicary configure destinate and in the a multipaper instance of with invasion to at least 9 at year. The partial Whether and was a terrige of make and it seem the antitude, or the finance make the transfer of the transfer of માં લેકા મુદ્રાત કું કુ હમાર લેક્સ લેક્સ લેકાનો લેકા માટે અને કરી લેકાનો તેમ તામ ઓફો મારે મું કે મોલ પણ કે જેવે છે. આ મામ

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 9 of 54

ENCOUNTER REPORT 11/16/2004 USP NUMBER:18321 PRINTED: 2/14/2006 JONES, ROBERT (M) 44 Years (12/30/61)

11/16/2004 08:30 SITE OUTSIDE FACILITY TYPE CONSULT CLINIC VISIT WELCH, JANET J entered by: WELCH, JANET J

DIAGNOSES/PROBLEMS

BHEB1 SPECIALTY EXAMINATION

PATIENT SEEN AT UMC HUNTSMAN. EXAM PERFORMED. PATIENT WITH MELANOMA ON SCALP. WILL REQUIRE EXCISION WITH SKIN GRAFT AND LYMPH NODE BIOPSY.

University of Utah Hospitals and Clinics Salt Lake City, UT

SP Final Report

JONES, ROBERT - 05051255

Result Type:

SP Final Report

Service Date:

December 02, 2004 3:44 PM

Result Status:

Final

Result Title:

SP FINAL REPORT

Authored By:

LAB -TECH, LAB on December 02, 2004 3:44 PM

Verified By:

LAB -TECH, LAB on December 02, 2004 3:44 PM

* Final Report '

ACCESSION

SP04016155

SP SUBMITTING PHYSICIAN

Sharma/Otolaryngology

SP CLINICAL HISTORY

History of scalp melanoma.

SP GROSS DESCRIPTION

Received are two containers with formalin labeled with the patient's name and medical record number.

Container one labeled "right neck level 5 sentinel lymph node" contains a lightly blue-tinged lymph node measuring 1.3 x 1.0 \times 0.5 cm, sectioned and submitted entirely in cassette 1A. Immunohistochemical stains for S-100 and melanin-A are obtained.

Container two labeled "right scalp lesion, stitch - anterior" contains an ovoid portion of thick hair-bearing scalp skin measuring 5.3 x 4.8 cm x up to 0.9 cm thick. A stitch is present through one end. Nearly centrally on the skin surface is a plaque-like area of slightly shiny thickened skin up to 1.2 \times 0.9 cm surrounded by a blue-green surgical dye blush. The anterior stitch is designated as 3 o'clock. The surgical margins are inked black. Cassette code: 2A-2H - entire circumferential margins en face beginning at 12 o'clock; 2I-2P - entire central lesional or scarred area blocked and submitted entirely, posterior to anterior. RG/rr

Signature Line

(RSG/rar) 12/03/04

SP MICROSCOPIC EXAMINATION

Sections of the right neck level sentinel node are unremarkable. Special immunoperoxidase stains on this node are in progress and an addendum will be issued when these studies are completed. Sections of the right scalp lesion show an intradermal nevus. We see no residual melanoma.

SP DIAGNOSIS

1. LYMPH NODE, RIGHT NECK LEVEL 5, EXCISION: - NO PATHOLOGIC DIAGNOSIS (1/1).

2. SKIN, RIGHT SCALP, WIDE EXCISION:

- MELANOCYTIC NEVUS, INTRADERMAL TYPE.

Printed by:

Olsen, Terri L

Printed on:

12/20/2004 2:07 PM

Page 1 of 2

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 11 of 54 CONSULTATION

UNIVERSITY OF UTAH HOSPITALS AND CLINICS SALT LAKE CITY, UTAH 84132

PATIENT LOC: AA07 VISIT NUMBER: 101332526

05051255

PAT NAME: ROBERT JONES DOB: Dec-30-1961 SEX: M

ACC #: 2160553

REQUESTING MD: PRAMOD SHARMA, MD

COMPLETED: Dec-2-2004 AT: 0950

ATTENDING MD: PRAMOD SHARMA, MD

EXAM: LYMPHOSCINTIGRAPHY CANCER BSPI

Diagnosis: 172.4

DISTRIBUTION DATE: Dec-10-2004

HISTORY: Melanoma of the right side of the scalp.

RADIOPHARMACEUTICAL: 420 uCi Tc99m Sulfur Colloid

PROCEDURE: Four 0.1 ml aliquots of Tc99m SC were injected around the right scalp melanoma. Dynamic imaging of the head and draining lymph nodes was acquired. The first node visualized in the superficial right supraclavicular region was marked for future surgical removal.

IMPRESSION:

SUCCESSFUL LYMPHOSCINTIGRAPHY, AND MARKING OF THE SENTINEL LYMPH NODE IN THE RIGHT SUPRACLAVICULAR REGION.

APPROVED BY: Boyd Vomocil, MD /signed by/ Boyd Vomocil, MD

by Boyd Vomocil, MD

TRANSCRIBED BY: TALKSTATION INTERFACE

PRIVATE

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 12 of 54



Pramod K. Sharma, M.D., F.A.C.S.

Assistant Professor Otolaryngology - Head and Neck Surgery Head and Neck Surgery Oncology Head and Neck Reconstruction



December 8, 2004

#18321

Dr. Tubbs Utah State Prison Department of Corrections PO Box 250 Draper, Utah 84020

RE:

Robert Jones

ENT: 89689 MRN: 05051255

Dear Dr. Tubbs.

I had the pleasure of seeing Robert Jones today in follow up. Mr. Jones is a 42 year old male with a history of a scalp melanoma. He underwent wide local excision with split thickness skin graft reconstruction and a sentinel node biopsy on 12/2/04. He has done well since that time and has no complaints today.

Physical Examination: Evaluation of the scalp reveals the bolster to be in good position. This was removed without difficulty and examination reveals 100% take of the graft. Examination of the neck reveals the sentinel node biopsy site to be well healed. The remainder of the head and neck examination was essentially normal.

Pathology: Final histopathology reveals negative margins of the primary site. Examination of the sentinel node reveals no evidence of malignant melanoma.

In summary, Mr. Jones is currently doing well and is recovering nicely from his recent surgery. I have asked him to return to see me in six months for cancer surveillance.

Thank you for allowing me to be involved in the care of this patient. I will keep you informed as to his progress.

Sincerely,

Lamol X Sharm

Pramod K. Sharma, MD, FACS

Assistant Professor

PKS:ec

PRIVATE

Skin Care Product Store Toll Free Ordering 1-800-393-38

Melanocytic Nevus (Mole)

Remove Pimples



Skin Disease **Information**

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Skin Care Store

Practice Information

Cosmetic Services

Medical Services

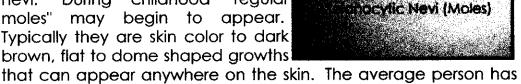
Appointments 352-2444 What is it? Melanocytic nevi are some of the most common

This patient information and photographs on Moles provided by John L. Meisenheimer, M.D. a board certified Dermatologist and skin care specialist based in Orlando, Florida. This information is not intended as a substitute for the medical advice or

arowths that occur on the skin. In general terms these are often referred to as moles, beauty spots or birthmarks. Melanocytic nevi can be present at birth or around the time of birth. These tend to be larger moles and are referred to as congenital nevi. Durina childhood "regular may begin to appear. Typically they are skin color to dark brown, flat to dome shaped growths

treatment of a dermatologist or other physician.

15-20 melanocytic nevi.



Meignocytic Nevus

Genetics play a role in the formation of What causes it? melanocytic nevi. Some families have a tendency to develop more moles than others.

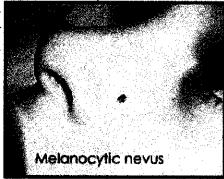
Is it dangerous? They are harmless, but sometimes they can be difficult to tell from skin cancer by lay persons. This can be especially true for a type of mole called a dysplastic nevus. Any growth that suddenly changes in size, color, shape, bleeds, itches on a regular

basis or becomes inflamed or irritated needs to be evaluated by a dermatologist. Although I remove many of them for cosmetic reasons, removal is not necessary unless they are irritated, inflamed or suspicious. New technology is available for following

moles for dangerous change over time called **SolarScan®**. I am pleased to be the first Dermatology Center in Central Florida to offer this technology to my patients.

Can it be cured? Melanocytic nevi are easily removed, but insurance considers this cosmetic unless they are inflamed,

irritated or clinically suspicious. Some Melanocytic nevi may re-grow after removal, but most do not. I have several techniques that I use to remove these growths. I try to choose a technique that gives the best cosmetic result for each growth depending on its size and location. Click here for information on cosmetic removals.



Will it spread? New ones usually continue to appear throughout life.

Is it contagious? Melanocytic nevi are not contagious and you can not "catch" them from anyone.

© John L. Meisenheimer, M.D. 2004 WWW.OrlandoSkinDoc.com

Last modified: 10/29/05

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 15 of 54

COCATION W-D 129 B

Dr Hardner, Medical Dept. an writing you to ask I , in late aussist line and was told Medical Room in the fromontory Building Rosser like Cancer- a Biopsy specimen was then sent to an out ttle, Washington - -TYPICAL MELANOMA) the specimen was in fact melanoma, and Melanoma Clinic determined that it was not melan as premous reports and stated yet Con excision was recommended of the small again assured re done to suspicious lump on my head/scalp, However of section of my scalp would have to be removed

#18321

DIVISION OF INSTITUTIONAL OPERATIONS

CLINICAL SERVICES

MEMORANDUM

TO:

Inmate Robert Jones USP #18321 Off #20454

Wasatch D-Block 129B

FROM:

Dr. Garden-Cliffical Services

DATE:

January 26, 2006

SUBJECT: YOUR LETTER OF 1/23/06

I am unable to address your request for financial compensation. Please discuss your issues with your caseworker or submit a grievance.

Case 2:06-cv-00527 OAK Docathering filed 06/30 66 Eag@1 of 5 E
INMATE GRIEVANCE FORM FEB 1 0 2006 GF-1
INMATE'S NAME Labert Ellis Janes USP# 18321 HOUSMEDARAN W-0129.
SECTION 1 - INFORMAL ACTION To be completed by inmate:
Specific nature of grievances (who, what, when, where and how): Between Gugust and Discernies of 7004 & was led to believe that I had skin (ances (melanoma) after seeking medical advise when I bound a lump on my head, I was told by P.A. faul Rosser that at (ooks like (ances: later a biopsy was taken by f. 4 Kennon Tubbes (after being first sent to Seattle; washington, tested and bound to be (A TITICAL MEIANOMA) and later sent to the UCSF Melanoma Cinic in California, tested and bound not to be malanoma? (After which I was later sent to the number ancer Institute Convinced that I did have melanoma, and scheduled for surgery on 12-2-04 upon follow-up of soid surgery by Dr. Sharma as Huntsman I was told I didn't have Cancer after all, Dr. Sharma Asaid think it was fust a Birthmark.
Identify those contacted regarding your grievance and state what YOU HAVE DONE to resolve the issue: have written a letter to Dr. Hardner and the Medical flept concerning the Nature of this Matter 1-23-06 Dr. Hardners response to Me Inter 24 JAN, 2006 Tells me to sulmit Grievance:
What is the specific remedy you seek? I am requesting that I be duly Compensated for the disfigurement of my head, and the Scars that are on my neck and my left log that I must carry with me for the rest of my life as a result of this proceedure, and not to Mention the Embarrassment from the (hole in my head) questions of what happened. And the Jelf Esteem issues that this has raised for he.

Inmate's Signature / Date

J Received on 2-73-06 LEVEL ONE GRIEVANCE STAFF RESPONSE UTAH STATE PRISON

CDIES	IANCE	NII IN	ADDD.
UKIE	ANCE	NUN	IDEK.

9908-60-670

INMATE NAME & HOUSING:

Jones, Robert

INMATE NUMBER:

18321

Mr. Jones, I have reviewed your grievance and your medical record.

Dr. Garden's response was generated in your request for financial compensation for the medical care given to you.

From what I researched, your care was appropriate. The results of the biopsy were from an independent lab and from UMC. Your lesion was so odd, that it had to be sent to San Francisco for final determination. The surgery was completed at their recommendation.

You were an educated participant in your care and your surgeries. You signed consents for surgery. Your scars are a result of surgery.

Thank-you for bringing this to my attention.

Shelley Buswell, RN	2/15/06
Staff	Date

Original:

Returned to Inmate

Copy:

Level One Grievance File



State of Utah

JON M. HUNTSMAN, JR. Governor

GARY R. HERBERT Lieutenant Governor Department of Corrections

SCOTT V. CARVER Executive Director

CHRISTINE MITCHELL Deputy Director

BELLE BROUGH

Director, Division of Institutional Operations

CLINT S. FRIEL

Draper Site Warden

March 17, 2006

Inmate Robert E. Jones #18321 Wasatch D 129B Utah State Prison P.O. Box 250 Draper, Utah 84020

RE:

Level 2 Response

Reference: 990860670

Inmate Jones:

I have reviewed your grievance. You allege a lesion removed from your scalp was not cancer making the surgery unnecessary. You request to be compensated for the alleged disfigurement of your head and the scars on your neck and left leg and alleged emotional distress.

You were a fully informed surgical patient. You gave your consent after all possible complications were reviewed with you. Scars are a natural occurrence after surgery and you knew or should have known scars would develop at the surgical site(s).

Your grievance remedies are denied.

You may appeal the Level 2 decision by following the procedure outlined in FDr 02/03.04.

Billie Casper, Inmate Grievance Coordinator

Tom Anderson, Correctional Administrator for,

Clint Friel, Warden Utah State Prison

60670

Reference No: 990860670 GF-3 Subject Code: Medita Location Code: . 3-72-06 Day/Month/Year: _ SUPPLEMENTAL GRIEVANCE PAGE Level: response to my level 2 Denial. I am remin again that I was fully informed clearly states Diagnosis # 2 anocytic news rticipating in a GRIEVANCE FORWARDED INMATE COPY WH/E51 Revised 9/1/94 FDr02/04.06

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 21 of 54



JON M. HUNTSMAN, JR. Governor

GARY R. HERBERT Lieutenant Governor

Department of Corrections

SCOTT V. CARVER Executive Director

Hearing Office

April 4, 2006

Robert Jones #18321 Wasatch D #213

RE: Grievance #990860670

Inmate Jones:

I reviewed the above-noted grievance. You allege the lesion removed from your scalp was not cancerous and the surgery was not necessary. You request to be compensated for the disfigurement of your head and for the emotional distress you suffered.

Your request for monetary compensation is beyond the scope of this office. This office is incapable of awarding monetary compensation for your claim.

Medical records indicate that you gave your consent for this surgery. The complications were reviewed with you and you were informed of the problems that would result from this surgery.

Your grievance remedy is denied.

There is no additional administrative review. If you remain unsatisfied, you must seek a judicial remedy.

Hearing Office

Utah Department of Corrections

cc: Grievance Coordinator file

14717 South Minute Man Drive, Draper, Utah 84020

Received 4-7-06 REJ

LEVEL ONE GRIEVANCE STAFF RESPONSE UTAH STATE PRISON

GRIEVANCE NUM	DED: 000	8-60-061
GRIEVANCE NUM	DER. 330	10-00-001

INMATE NAME & HOUSING: JONES, ROBERT W-D

INMATE NUMBER:

18321

Mr. Jones, I have reviewed your grievance and your medical record.

You were seen subsequent to you putting in a grievance and seen by 2 Pas on December 5, 2005. 1 do not see mention in their notes any complaints of your knee, back, or neck pain. PA Coombs did evaluate your feet and stated that you did not need a shoe clearance. He evaluated your hip and has asked that you use your crutches for 2 more weeks.

I have asked that you be put on PA Coombs next available schedule to evaluate your knee, back, and neck pain. Your care appears appropriate. If you have co-pay issues they need to be addressed with the medical copay administrator. I do not handle those issues.

Thank-you for bringing this to my attention.

Shelley Buswell, RN	12/10//05
Staff	Date

Original:

Returned to Inmate

Copy:

Level One Grievance File

JON M. HUNTSMAN, JR. Governor

GARY R. HERBERT Lieutenant Governor

Departme SCOTT V. CARVER

Case 2:06-cv-00**5**27-

Executive Director BELLE BROUGH

Director, Division of Institutional Operations

CLINT S. FRIEL Warden, Draper Site

THIS REPLY RECEIVED 2/13/06 REJ February 7, 2006

Inmate Robert Jones #18321 Wasatch D 129B Utah State Prison P.O. Box 250 Draper, Utah 84020

RF: Level 2 Response

Reference: 990860061

Inmate Jones:

I have reviewed your grievance. You allege you have not received proper medical treatment for the injuries you suffered prior to returning to prison. You request an x-ray of your right ankle, left knee, back, and hip as well as better pain medication.

Your medical records show you have received and continue to receive proper medical treatment, including referral to specialists, pain medication, and diagnostic testing, for the injuries you had when you returned to prison.

Your injuries have been x-rayed and you had an MRI and a CT scan.

Your grievance remedy is resolved.

You may appeal the Level 2 decision by following the procedure outlined in FDr Q2/03.04.

Billie Casper, Inmate Grievance Coordinator

Tom Anderson, Correctional Administrator for,

Clint Friel, Warden

Utah State Prison

60061

Document 3 File 06/30/06 Page 25 of 54
Reference No: 990-860-061 Case 2:06-cv-00527-DAK GF-3 Subject Code: Medical Location Code: ievance Coordinator Day/Month/Year: SUPPLEMENTAL GRIEVANCE PAGE Level: GRIEVANCE FORWARDED TO LEVEL 3 INMATE COPY WH/E51 Revised 9/1/94 FDr02/04.06



JON M. HUNTSMAN, JR. Governor

GARY R. HERBERT Lieutenant Governor

Department of Corrections

SCOTT V. CARVER Executive Director

Hearing Office

February 27, 2006

Robert Jones #18321 Wasatch D #129

RE: Grievance #990860061

Inmate Jones:

I reviewed the above-noted grievance. You allege you have not received proper medical treatment for your injuries. You request treatment for these problems and better pain medication.

Records indicate that medical personnel are aware of your problems and they are providing you with ongoing treatment. Attempts are being made to resolve your medical problems.

Your grievance remedy is resolved.

There is no additional administrative review. If you remain unsatisfied, you must seek a judicial remedy.

Eraig Challs
Hearing Office

The state of the s

Utah Department of Corrections

cc: Grievance Coordinator file

dreceived this notice on 3-1-06 REJ

MEMORANDRUM

TO:

ROBERT JONES 18321 W-D 129B

FROM:

CLINICAL SERVICES, RECORDS

DATE

FEBRUARY 14, 2006

SUBJECT: RELEASE OF RECORDS

Enclosed is a copy of your records per your request dated: 1-23-06

Number of copies: 17 (UMC REPORTS: 10-3-04, 11-15-04, 11-16-04, 12-2-04, 12-8-04, 10-12-05; COMPUTER CHARTING FROM 11-16-04 TO 2-13-06)

AMOUNT CHARGED TO INMATE ACCOUNT: \$4.25

These records will be provided to you one time only. New records can be requested as they are generated. Please safeguard them.

Note,

I have destributed this information throughout this file where I feel that into is prevalent.

LET

4-23-06

RECORDS-REQUESTS A STREET AS A
(1) Requester's Name: Lofell & Jones Date Requested: 1-23-06 Agency Name or 1837 OFF#20454 Mailing Address: No-0-1298 Dayrime Telephone:
(2) In accordance with the Governmental Records Access Management Act,
1. Indicate complete name and prison number (if applicable) of the subject of the information requested ROPSRI SIIIS TONES 1199 # 18321 OFFENDER # 20454
2. Indicate the Otah Department of Corrections division, facility, or program originating the information requested MENICAL
3. Indicate the approximate year, month, and day the information requested was entered into the record 8-10-04 TO 1-18-05. 4. Indicate, with as much detail, as possible, the nature of the informa-
DE MELANOMA TOMATION REQUIRED TESTING and OF MELANOMA TOMATOMAN CANCER POST AND OF MELANOMAN TOMATOMAN CANCER POST AND OF MELANOMAN (USO additional pages as needed)
(3) LEGAL ADIMORITY TO RECEIVE THE IMPORMATION (evidence must be provided)
1. [X] I am requesting information which I believe to be <u>Public</u> . 2. [X] I am the <u>subject</u> of the record being requested. 3. [] I am the <u>person</u> who <u>provided</u> the <u>information</u> . 4. [] I am the <u>parent or legal quardian</u> of the subject of the information. 5. [] I have a <u>Power of Attorney</u> from the subject of the information. 6. [] I have a <u>Notarized Release</u> from the subject of the information. 7. [] I have a <u>Court Order</u> from a court of competent jurisdiction.
(4) If requested records are classified "Controlled", the requester shall sign the following:
ACKNOWLEDCHENT I hereby acknowledge that I am a physician, psychologist, or certified social worker and that I will not disclose controlled information to any person, including the subject of the records, except in response to a lawful order of the State Records Committee or the district court.
Holvert Elmes 1-76-06 (date)

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 29 of 54 CONSULTATION

UNIVERSITY OF UTAH HOSPITALS AND CLINICS SALT LAKE CITY, UTAH 84132

PATIENT LOC: AC18

VISIT NUMBER: 101007797

MRN: 05051255

PAT NAME: ROBERT JONES DOB: Dec-30-1961 SEX: M

REQUESTING MD: RICHARD GARDEN, MD ACC #: 2151244

COMPLETED: Nov-15-2004 AT: 0742 ATTENDING MD: PRAMOD SHARMA, MD

EXAM: MRI L-SPINE, WO CONT REG BSPII

Diagnosis: 722.10,724.02,724.2

DISTRIBUTION DATE

MRI of the lumbar spine without gadolinium

Indication: Back and right leg pain.

Technique: Sagittal and axial T1 and T2 weighted images were obtained through the lumbar spine.

Findings: Alignment is anatomical. The native canal dimensions are shallow on a congenital basis. The conus is seen at the appropriate level. The bone marrow signal is normal. There is a large, extruded disc fragment, eccentric to the right noted at the L5/S1 level.

Axial images reveal an unremarkable appearance to the L1/2, L2/3and L3/4 levels.

At the L4/5 level, mild facet arthropathy is seen without significant foraminal compromise or canal stenosis.

The L5/S1 level, there is a disc extrusion, eccentric to the right causing mass effect on the exiting S1 nerve root. Facet arthropathy is also noted at this level. On the basis of facet arthropathy, disc extrusion and a congenitally shallow canal, there is mild central canal stenosis at this level.

Impression: Congenitally shallow canal.

Large, right-sided disc extrusion at the L5/S1 level with mass effect on the exiting S1 nerve root.

APPROVED BY: Abigail Childs, MD (FELLOW) /signed by/ Abigail Childs, MD (FELLOW) Richard H Wiggins /signed by/ Richard H Wiggins

I have personally reviewed the images for this examination and agree with the report transcribed. by Richard H Wiggins

TRANSCRIBED BY: TALKSTATION INTERFACE

PRIVATE

ENCOUNTER REPORT 11/17/2004 USP NUMBER:18321 PRINTED: 2/14/2006 JONES, ROBERT (M) 44 Years (12/30/61)

11/17/2004 08:03 SITE WASTACH TYPE MD SICK CALL CLINIC VISIT TUBBS, KENNON C, MD entered by: TUBBS, KENNON C, MD

PROCEDURES

BXKT4 REFERRAL TO OUTSIDE CONSULTANT

NEUROSURGERY FOR EVAL OF RECENT MRI WHICH SHOWED LARGE R SIDED DISC EXTRUSION AT L5S1 WITH MASS EFFECT ON THE EXITING S1 NERVE ROOT

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 31 of 54

ENCOUNTER REPORT 12/23/2004 USP NUMBER:18321 PRINTED: 2/14/2006

JONES, ROBERT (M) 44 Years (12/30/61)

12/23/2004 14:21 SITE LONE PEAK FF TYPE PA OR NP SICK CALL CLINIC VISIT COOMBS, JOSEPH A, PAC entered by: COOMBS, JOSEPH A, PAC

neered by leoonbb, booblin n, ine

DISPOSITIONS

AACQ1 DISPOSITION RTC PRN

DIAGNOSES/PROBLEMS

BLKJ7 MULTIPLE SYSTEM COMPLAINT <Subjective, RFV, 12/23/2004>

SURGERY TO REMOVE CA SCALP AND NECK FOR NODE BIOPSY

PHYSICAL EXAM

WBAP3-N NEUROLOGICAL EXAM NORMAL

CASW1-O NECK INCISION HEALING WELL.

CANK9-O FACE JAW NML

CDBX4-O SCALP NO INFECTION HEALING WELL

THERAPIES

GTAF2 BACITRACIN OINTMENT

15GM 1 TOP A

QD START: 12/23/2004 STOP :2/6/2005

DISCONTINUED: 1/26/2005 Inactivated. WALKER, CINDY L

ADMINISTRATION INFO. : LG AMOUNT *SC Rx#583787

WSHL1-1 ACETAMINOPHEN (TYLENOL)

325MG 2 PO AP

BID START: 12/23/2004 STOP:1/13/2005 *SC Rx#583788

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 32 of 54

ENCOUNTER REPORT 10/12/2005 USP NUMBER:18321 PRINTED: 2/14/2006 JONES, ROBERT (M) 44 Years (12/30/61)

10/12/2005 07:21 SITE OUTSIDE FACILITY TYPE CONSULT CLINIC VISIT WELCH, JANET J entered by: WELCH, JANET J

DIAGNOSES/PROBLEMS

BHEB1 SPECIALTY EXAMINATION

IMPRESSION OF C-SPINE CT: NO CHANGE IN THE APPEARANCE OF MILD MULTILEVEL DEGENERATIVE DISC DISEASE IN THE CERVICAL SPINE. NO ACUTE OSSEOUS INJURY TO THE CERVICAL SPINE.

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 33 of 54

ENCOUNTER REPORT 10/12/2005 USP NUMBER:18321 PRINTED: 2/14/2006 JONES, ROBERT (M) 44 Years (12/30/61)

10/12/2005 07:20 SITE OUTSIDE FACILITY TYPE CONSULT CLINIC VISIT WELCH, JANET J entered by: WELCH, JANET J

DIAGNOSES/PROBLEMS

BHEB1 SPECIALTY EXAMINATION

IMPRESSION OF HEAD CT: NO DEFINITE EVIDENCE OF AN ACUTE

INTRACRANIAL PROCESS. RESOLUTION OF POSTERIOR FALX

THICKENING.

8915852115 11/07/2005 16:16

PAGE 02

CONSULTATION UNIVERSITY OF UTAH HOSPITALS AND CLINICS SALT LAKE CITY, UTAH 84132

PATIENT LOC: AC18

VISIT NUMBER: 110456555

MRN: 16244642

PAT NAME: ROBERT ELLIS JONES

DOB: Dec-30-1961 SEX: M

ACC #: 2402097 COMPLETED: Oct-12-2005 AT: 0720 REQUESTING MD: STEPHEN E MORRIS, MD ATTENDING MD: WILLIAM COULDWELL, MD

EXAM: CERVICAL SPINE CT WO BSPII

Diagnosis: 959.09,722.4,E819.9

DISTRIBUTION DATE

DATE: 10/12/05.

PROCEDURE: CT scan of the cervical spine with sagittal and

coronal reformats.

COMPARISON: 10/2/05.

INDICATION: Trauma.

TECHNIQUE: Thin axial images were obtained of the cervical spine from the base of the skull through T1. Sagittal and coronal

reformats were obtained.

FINDINGS:

No fracture or malalignment is seen. Bone mineralization is normal. The vertebral body heights are normal. Very mild loss of the vertebral disc space height at C2/C3, C3/C4, C4/C5 and C5/C6. Mild anterior osteophytes are identified at the C5/C6 disc space. Facet joints are normal.

Incidentally visualized soft tissues of the neck are normal in appearance. The lung apices are normal.

IMPRESSION:

No change in the appearance of mild multilevel degenerative disc disease in the cervical spine. No acute osseous injury to the cervical spine.

APPROVED BY:

Thomas Druzgal, MD (RESIDENT) /signed by/ Karen L Salzman Karen L Salzman /signed by/ Karen L Salzman

I have personally reviewed the images for this examination and agree with the report transcribed. by Karen L Salzman

TRANSCRIBED BY: TALKSTATION INTERFACE EDITED BY: KAREN L SALZMAN



ENCOUNTER REPORT 10/28/2005 USP NUMBER:18321 PRINTED: 2/14/2006 JONES, ROBERT (M) 44 Years (12/30/61)

10/28/2005 09:02 SITE WASTACH TYPE MD SICK CALL CLINIC VISIT TUBBS, KENNON C, MD entered by: TUBBS, KENNON C, MD

DIAGNOSES/PROBLEMS

BLDJ8 DOCTOR ASSESSMENT

IM CONT TO COMPLAIN OF PAIN IN NECK AND BACK FROM MVA AND DOES HAVE POSITIVE MRI FINDINGS FROM 04 THAT SHOW MASS EFFECT ON S1 NERVE. CONT TO HAVE NECK PAIN IN NECK BRACE FROM MVA WILL GIVE MUSLCE RELAXER FOR 1 MONTH THEN FU WITH NEUROSURG

THERAPIES

YTSA2-1 CYCLOBENZAPRINE (FLEXERIL)

10MG 1 PO ANH

TID START: 10/28/2005 STOP :11/27/2005 *SC Rx#638564

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 36 of 54

ENCOUNTER REPORT 12/5/2005 USP NUMBER:18321 PRINTED: 2/14/2006

JONES, ROBERT (M) 44 Years (12/30/61)

12/5/2005 17:23 SITE WASTACH TYPE PA OR NP SICK CALL CLINIC VISIT COOMBS, JOSEPH A, PAC entered by: COOMBS, JOSEPH A, PAC

DISPOSITIONS

AACO1 DISPOSITION RTC PRN

\I DO NOT THINK HE NEEDS A SHOE CLEARANCE

DIAGNOSES/PROBLEMS

VLD04 MUSCULOSKELETAL SYSTEM COMPLAINT <Subjective, RFV, 12/5/2005>

F/I L ACETABULAR FX, DOING WELL, OFF CRUTCHES, NEEDS THEM FOR 2 MORE WEEKS, WAS TOLD TO USE THEM, STILL HAS THEM. WILL GIVE BOTOM BUNK X 3 MONTHS ONLY DOING WELL,

RTC PRN, WEAN OFF CRUTCHES

THERAPIES

BWBC8-P CLEARANCE RECOMMEND APPROVAL - PRINT CLEARANCE BOTTOM BUNK FOR THREE MONTHS ONLY GOOD FOR THREE MONTHS ONLY,

PRIVATE

🖾 Print

Patient: JONES, ROBERT ELLIS Offender #: 20454

Sex: M Age: 44

Height: 5' 9" Weight: 205 Housing: SP, WAS, WD, 1, 29, B

* Transaction Type: CHARTING - MISCELLAN * Transaction ID: 358680 Encounter ID:4877

* Charted By: JOSEPH COOMBS Date: 01/30/2006

* Authorized By: JOSEPH COOMBS Date: 01/30/2006 Time: 11:42

Charted By: JOSEPH COOMBS Date: 01/30/2006 Time: 11:22

Title: PROGRESS NOTE Nurse Noting Required: NO Comments: RENEWED NSAIDS

* Transaction Type: OUTSIDE CONSULT

* Transaction ID: 358674 Encounter ID:4877

* Order Reference ID: 31897

* Charted By: JOSEPH COOMBS Date: 01/30/2006

* Authorized By: JOSEPH COOMBS Date: 01/30/2006 Time: 11:38

Conditions

Outside Provider ID: 31 Provider Name: Ortho #10, UMC

Speciality:

Phone: (801)581-2041

Address 1: 50 North Medical Dr.

Address 2: null

City: Salt Lake City State: UT

Consult Reason: F/U FOR HANDS ON AT UMC AFTER MRI L KNEE, WILL DISCUSS SURGERY

NEED AT THAT TIME

Requested Date: Start: 01/30/2006 End: 02/06/2006

Comments:

* Transaction Type: OUTSIDE CONSULT

* Transaction ID: 358670 Encounter ID:4877

* Order Reference ID: 31895

* Charted By: JOSEPH COOMBS Date: 01/30/2006

* Authorized By: JOSEPH COOMBS Date: 01/30/2006 Time: 11:38

Conditions

Outside Provider ID: 5 Provider Name: CTs/MRIs/Radiology Scheduling, UMC

Speciality: GENERAL SURGERY INTERNAL MEDICINE

Phone: (801)581-7840

Address 1: 50 North Medical Dr.

Address 2:

City: Salt Lake City State: UT

Consult Reason: PCL DISRUPTION BY EXAM, MRI L KNEE

MRI L KNEE

Requested Date: Start: 01/30/2006 End: 02/06/2006

Comments:

* Transaction Type: PATIENT ENCOUNTER

* Transaction ID: 358660 Encounter ID:4877

* Charted By: JOSEPH COOMBS

Date: 01/30/2006

* Authorized By: JOSEPH COOMBS Date: 01/30/2006 Time: 11:38

Type: RETURN FROM CONSULT Start: 01/30/2006 11:38 End: 01/30/2006 11:42

Desc.: telemed ortho, I knee pcl, mri I knee, hands on at umc after mri

PRIVATE

Print

Patient: JONES, ROBERT ELLIS Offender #: 20454

Sex: M Age: 44

Height: 5' 9" Weight: 205 Housing: SP, WAS, WD, 1, 29 , B

* Transaction Type: OUTSIDE CONSULT RETU * Transaction ID: 413902 Encounter ID:0

* Transaction Reference ID: 358674

* Charted By: JANET WELCH Date: 02/13/2006

* Authorized By: JANET WELCHDate: 02/13/2006 Time: 14:07

Report Title: Ortho 2/13/06

Report Summary: Left knee PCL tear. Non-op at this time. Recommend aggressive

quadricep strengthening. F/U 2 months telemed. Note scanned.

Report File: N/A

* Transaction Type: OUTSIDE CONSULT RETU * Transaction ID: 413062 Encounter ID:0

* Transaction Reference ID: 358670

* Charted By: JANET WELCH Date: 02/13/2006

* Authorized By: JANET WELCHDate: 02/13/2006 Time: 10:49

Report Title: MRI 2/7/6

Report Summary: Impression left knee MRI: complete PCL tear. Focal cartilage

defect in the medial femoral condyle. Full report scanned.

Report File: N/A

Back

ChartReviewDetailsWindow.jsp



MEMORANDRUM

TO:

ROBERT JONES 18321 WD 129B

FROM:

CLINICAL SERVICES, RECORDS

DATE:

MARCH 29, 2006

SUBJECT: RELEASE OF RECORDS

Enclosed is a copy of your records per your request dated: 3-20-06

Number of copies: 1 (UMC REPT DATED 12-8-04)

WE HAVE NOT RECEIVED THE REPORT FROM THE UMC FOR 3-20-06

AMOUNT CHARGED TO INMATE ACCOUNT: \$.25

These records will be provided to you one time only. New records can be requested as they are generated. Please safeguard them.

Received letter dated 8-December, 2004 Post Surgery. From Dr. Sharma to Dr. Tubba. RET

Document 3 Filed 06/30/06 RDCORDS RDOUDSIE Requester's Name: POBELT E-JONES Date: 3-20-06 UOFU MED CEUTER Prison Number: 1832 Agency Name: Mailing Address: _ Daytime Phone #: (2)In accordance with the Governmental Records Access Management Act, I am requesting to view/copy the following record (s): Indicate complete name and prison number (if applicable) of the subject of the information requested LOBERT ELLIS JONES Indicate the Utah Department of Corrections Division, facility, or 2. program originating the information requested W-n 129 B Indicate the approximate year, month, and day the information requested was entered into the record 3-20-063. Indicate, with as much detail as possible, the nature of the 4. information requested I WAS SEEN AT UMC DERMATO DEPT. AND WANT TO VEIW RECORDS FROM TOD VISIT, OR. STATED I DID HAVE MELANOMA RESUL IN SULGERY ON- 12-2-04 AND JOR ADDITIONAL DOCUMENTATION THAT STATES (use additional pages as needed) (3) LEGAL AUTHORITY TO RECEIVE THE INFORMATION (evidence must be provided) 1. M I am requesting information which I believe to be Public. 2. [x] I am the <u>subject</u> of the record being requested. 3. [] I am the person who provided the information. 4. [] I am the parent or legal quardian of the subject of the information. 5. [] I have a Power of Attorney from the subject of the information. 6. [] I have a Notarized Release from the subject of the information. 7. [] I have a Court Order from a court of competent jurisdiction. (4)If requested records are classified "Controlled", the requester shall sign the following: ACKNOWLEDGMENT I hereby acknowledge that I am a physician, psychologist, or certified social worker and that I will not disclose controlled information to any person, including the subject of the records, except in response to a lawful order of the State Records Committee or the District Court.

MEMORANDRUM

TO:

ROBERT JONES 18321 WD 303B

FROM:

CLINICAL SERVICES, RECORDS

DATE:

APRIL 26, 2006

SUBJECT: RELEASE OF RECORDS

Enclosed is a copy of your records per your request dated: 4-23-06

Number of copies: 2 (MRI DATED 3-3-06)

AMOUNT CHARGED TO INMATE ACCOUNT: \$.50

These records will be provided to you one time only. New records can be requested as they are generated. Please safeguard them.

		renue u	anyou do
	RECORDS RECUE		
(1) Requester's Name: _ Agency Name or Prison Number: _	LOBERT E-JONES U.S.P#18221	Date Requested:	4-13-06
Mailing Address: _	P.O.BOX 250 Bues	ness Address:	
Daytime Telephone:			
	th the Governmental Re to view/copy the follo		ment Act,
<u>subject of the i</u>	e name and prison number of properties of the pr	LOBERT E. JONES	of the
2. Indicate the Uta	h Department of Correcting the information re	rtions division, fac	ility, or
	roximate year, month, tered into the record		
DONE ON MY	s much detail as possi LECORDS PERTAINI LOWER BACK ON 3 THAT M.R.D. (use additional pages	-3-06 AND AUST	THAT WAS
(3)	AUTHORITY TO RECEIVE :		
1. [4] I am requesting 2. [4] I am the subjec 3. [] I am the person 4. [] I am the parent 5. [] I have a Pover 6. [] I have a Notari 7. [] I have a Court	t of the record being who provided the info or legal overdien of of Attorney from the a zed Release from the a	requested. rmation. the subject of the subject of the information in the information in the information.	information. mation. mation.
(4) If requested reco. shall sign the fo.	rds are classified °Co Llowing:	ntrolled", the requ	ester
I hereby acknowledge to social worker and that person, including the lawful order of the St	I will not disclose of the records	psychologist, or ce outrolled informati , except in respons	on to any
- Robert E	man ().5. P. #18321	4-23-06	

CONSULTATION UNIVERSITY OF UTAH HOSPITALS AND CLINICS SALT LAKE CITY, UTAH 84132

PATIENT LOC: AC18

VISIT NUMBER: 114573520

MRN: 05051255

PAT NAME: ROBERT JONES DOB: Dec-30-1961 SEX: M

ACC #: 2512054 COMPLETED: Mar-3-2006 AT: 0739

REQUESTING MD: RICHARD GARDEN, MD

ATTENDING MD: MICHAEL L HADLEY, MD

EXAM: MRI L-SPINE W/WO CONT BSPII /15ml parmag con

Diagnosis: 722.10, V45.4

DISTRIBUTION DATE: Mar-13

20454

EXAMINATION: MRI LUMBAR SPINE

DATE: March 3, 2006

COMPARISON: November 15th, 2004

HISTORY: Back pain

TECHNIQUE: MRI of the lumbar spine was performed using the standard spine coil. The following sequences were obtained:

1. Sagittal spin echo T1, FSTIR and FSE T2.

Axial FSE T2 angled to the intervertebral disc spaces

Stack axial FSE T2 through the lumbar spine

FINDINGS: This dictation assumes 5 lumbar type vertebral bodies.

The conus medullaris has a normal termination at L1/L2. The visualized portions of the spinal cord appear normal. The visualized retroperitoneum is unremarkable.

Vertebral bone marrow is unremarkable. Alignment is normal.

A posterior disc bulges seen at the T11/12 level.

L1/L2: No significant disk pathology, spinal stenosis or neural foraminal narrowing.

L2/L3: No significant disk pathology, spinal stenosis or neural foraminal narrowing. L3/L4: No significant disk pathology, spinal stenosis or neural

foraminal narrowing.

L4/L5: No significant disk pathology, central canal stenosis, or

neural foraminal narrowing.

L5/S1: Postoperative changes are present at this level, with the expected degree of surgical enhancement. Residual posterior central disc protrusion is present. This results in severe bilateral lateral recess and neural foraminal stenosis. The overall size of the protrusion is significantly less than on the prior examination.

IMPRESSION:

1. Postsurgical changes at L5/S1, with residual posterior disc protrusion resulting in severe bilateral lateral recess and

CONSULTATION UNIVERSITY OF UTAH HOSPITALS AND CLINICS SALT LAKE CITY, UTAH 84132

PATIENT LOC: AC18

VISIT NUMBER: 114573520

MRN: 05051255

PAT NAME: ROBERT JONES DOB: Dec-30-1961 SEX: M

ACC #: 2512054 COMPLETED: Mar-3-2006 AT: 0739 REQUESTING MD: RICHARD GARDEN, MD

ATTENDING MD: MICHAEL L HADLEY, MD

EXAM: MRI L-SPINE W/WO CONT BSPII /15ml parmag con

Diagnosis: 722.10, V45.4

DISTRIBUTION DATE: Mar-13

foraminal narrowing. Expected degree of postsurgical enhancement is present.

2. Posterior disc protrusion at T11/12 resulting in mild central canal narrowing.

APPROVED BY:

Vineet Sharma, MD (FELLOW) /signed by/ Vineet Sharma, MD (FELLOW) Richard Kent Sanders /signed by/ Richard Kent Sanders

by Richard Kent Sanders

Scanned

TRANSCRIBED BY: TALKSTATION INTERFACE EDITED BY: TALKSTATION INTERFACE

MEMORANDRUM

TO:

ROBERT JONES

18321

WD 303B

FROM:

CLINICAL SERVICES, RECORDS

DATE:

APRIL 28, 2006

SUBJECT: RELEASE OF RECORDS

Enclosed is a copy of your records per your request dated: 4-12-06

Number of copies: 2 (LIST OF ALL MEDICATIONS)

AMOUNT CHARGED TO INMATE ACCOUNT: \$.50

These records will be provided to you one time only. New records can be requested as they are generated. Please safeguard them.

RETHING-REQUEST: 100 100 100 100 100 100 100 100 100 10
(1) Requester's Name: ROBAT SUTS TONES Date Requested: 4-12-06 Agency Name or Prison Number: U.S.P # 1835 W-P 303 B Mailing Address: P.O.BOX DEO Business Address: ORAPER (UTAH) Daytime Telephone:
In accordance with the Governmental Records Access Management Act, I am requesting to view/copy the following record(s): 1. Indicate complete name and prison number (if applicable) of the subject of the information requested NOBERT & JONES
2. Indicate the Utah Department of Corrections division, facility, or program originating the information requested <u>M&DIA(&SCORUS</u>
3: Indicate the approximate year, month, and day the information requested was entered into the record AUGUST 2004 TO PRESENT. 4. Indicate, with as much detail as possible, the nature of the information requested I WOULD CILL AN ACTUAL PRINTOUT OF ALL THE MEDICATIONS IHAIE TAKEN THAT WERE PROJECTIONS TO ME INDICATIONS. (use additional pages as needed) AND WHAT POR!!
(3) LEGAL AUTHORITY TO RECEIVE THE IMPORMATION (evidence must be provided)
1. [*] I am requesting information which I believe to be <u>Public</u> . 2. [*] I am the <u>subject</u> of the record being requested. 3. [] I am the <u>person</u> who <u>provided</u> the <u>information</u> . 4. [] I am the <u>person</u> or legal <u>quardian</u> of the subject of the information. 5. [] I have a <u>Power of Attorney from</u> the subject of the information. 6. [] I have a <u>Rotarized Release</u> from the subject of the information. 7. [] I have a <u>Court Order</u> from a court of competent jurisdiction.
(4) If requested records are classified "Controlled", the requester shall sign the following:
ACCOUNTEDGREET I hereby acknowledge that I am a physician, psychologist, or certified social worker and that I will not disclose controlled information to any person, including the subject of the records, except in response to a lawful order of the State Records Committee or the district court.
Robert Ellis Imes 4-12-06 (signature) (date)

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 47 of 54

Medication Hx for JONES, ROBERT Printed on 4/27/2006

prescribed since 12/1/94

						•
NAPROXEN	500MG	1	PO	BID	01/28/2004	2/24/2004
RANÍTIDINE	150MG	1	PO	BID	01/28/2004	04/26/2004
AMITRIPTYLINE	50 MG	. 1	PO	QD	02/04/2004	3/1/2004
CYCLOBENZAPRINE	10MG	1	PO	BID	02/06/2004	02/11/2004
NAPROXEN	500MG	1	PO	BID	02/24/2004	03/24/2004
ERYTHROMYCIN TOPICAL SOLUTION	2%	1	TOP	BID	02/24/2004	03/09/2004
PSYLLIUM POWDER	500GM	1	PO	BID	02/24/2004	03/24/2004
AMITRIPTYLINE	50MG	1.5	PO	QHS	03/01/2004	08/27/2004
TREATMENTS				QD	03/01/2004	08/27/2004
NAPROXEN	500MG	1	PO	BID	05/14/2004	08/12/2004
RANITIDINE	150MG	1	PO	BID	05/14/2004	09/11/2004
TOLNAFTATE CREAM	1%	1	TOP	BID	07/13/2004	07/27/2004
NAPROXEN	500MG	1	PO	BID	08/13/2004	1/26/2005
BACITRACIN AND POLYMYXIN OPTH	5GM	1	TOP	BID	08/13/2004	09/12/2004
AMITRIPTYLINE	50MG	1.5	PO	QHS	09/05/2004	
RANITIDINE	150MG	1	PO	BID		12/27/2004
PSYLLIUM POWDER	500GM	1	PO	BID		12/19/2004
PROPOXYPHENE APAP 100/650	1TAB	1	PO	SPECI	12/02/2004	
2 PILLS QID						
BACITRACIN OINTMENT	15GM	1	TOP	QD	12/23/2004	1/26/2005
ACETAMINOPHEN	325MG	2	PO	BID	12/23/2004	01/13/2005
RANITIDINE	150MG	1	PO	BID	01/10/2005	1/26/2005
BACITRACIN OINTMENT	15GM	1	PO	SPECI	10/06/2005	
TO ABRAISIONS DAILY						
OXYCODONE AND ACETAMINOPHEN	1TAB	2	PO	QID	10/06/2005	10/11/2005
ACETYLSALICYLIC ACID	81MG	1	PO	QD		11/05/2005
NAPROXEN	500MG	1	PO	BID		10/14/2005
MAGNESIUM HYDROXIDE	5CC	6	PO	SPECI	10/08/2005	
30 ML QOD PRN CONSTIPATION					• •	•
DIPHENHYDRAMINE HCL	50MG	1	PO	BID	10/08/2005	10/14/2005
AMITRIPTYLINE	25MG	3	PO	QD	10/13/2005	
CYCLOBENZAPRINE	10MG	1	PO	TID	10/28/2005	11/27/2005
TREATMENTS				PRN	12/05/2005	

Patient: JONES, ROBERT Housing: SP WAS WD 3 03 B

Rise. Date: N/A

Offender #: 20454 Security Class: 1-B Mth. To Rise.: N/A

Allergies: 🖺

Active DX: OTHER SYMPTOMS REFERABLE TO BACK | INTERNAL DERANGEMENT OF KNEE | BACKACHE, UNSPECIFIED | ENCOUNTERS FOR ADMINISTRATIVE PURPOSES |

REFLUX ESOPHAGITIS | HEADACHE |

Medication Order List 🗓 🖴 🗓

Active Medications

Order Date Ordered By Order Status

<u>ි 53792 **04/25/2006 SIDNEY G ROBERTS FILLED** (Rx:32686)</u>

CYCLOBENZAPR TAB 10MG 1 TABLET TID 04/25/2006 10 DAYS

Comments:

53787 **04/25/2006 SIDNEY G ROBERTS FILLED** (Rx:32696)

TRAMADOL HCL TAB 50MG 2 TABLET BID 04/25/2006 60 DAYS

Comments: 2

F6 41379 03/09/2006 PAUL ROSSER FILLED (Rx:26541)

RANITIDINE TAB 150MG 1 TABLET BID 03/09/2006 360 DAYS

Comments:

1 36986 **02/21/2006 SIDNEY G ROBERTS FILLED** (Rx:24153)

GABAPENTIN 1 TABLET TID 02/21/2006 179 DAYS

Comments: 100MG TID FOR X 3DAYS, 300MG TID X3DAYS THEN 600MG PO TID

විම 36985 02/21/2006 SIDNEY G ROBERTS FILLED (Rx:24154)

NABUMETONE TAB 750MG 1 TABLET BID 02/21/2006 89 DAYS

Comments:

Expired Medications in the last 14 days

Order Date Ordered By Order Status ReOrder

No Expired Medication(s) found for the Patient

Search

ReOrder

Record(s) displayed/found: 1-5/5

Page(s): 1 |

MedicationOrderListRO.jsp



Faculty

CLOUGH SHELTON, M.D. Professor and Chief Otology/Neurotology (801) 585-5450

BRANDON-G. BENTZ, M.D. Assistant Professor Head and Neck Oncology (801) 581-7515

DEAN W. GRAY, M.D. Associate Clinical Professor Otolaryngology (801) 587-7678

J. FREDRIK GRIMMER, M.D. Assistant Professor Pediatric Otolaryngology (801) 588-3983

LELAND P. JOHNSON, M.D. Associate Clinical Professor Otolaryngology (801) 585-7143

STEVEN R. MOBLEY, M.D. Assistant Professor Facial Plastic & Reconstructive Surgery (801) 585-5223

HARLAN R. MUNTZ, M.D. Professor Pediatric Otolaryngology (801) 588-3983

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MARSHALL E. SMITH, M.D. Associate Professor Laryngology Pediatric Otolaryngology (801) 588-3983

SUSAN L. THIBEAULT, Ph.D. Assistant Professor Speech Language Pathology Research Director (801) 587-3888 April 5, 2006

Mr. Robert Jones Inmate # 18321 Housing # W-D 129 B Utah State Prison Department of Corrections PO Box 250 Draper, Utah 84020

RE: Robert Jones MRN: 05051255

Dear Mr. Jones,

I have reviewed your records and you were found to have had a melanoma of 0.75 mm. thickness, of the scalp. You underwent excision of this scalp lesion with a split thickness skin graft reconstruction on 12/2/04. In addition, a lymph node that represented the drainage point of this area was examined and was found to have no cancer in it, indicating that the cancer had not spread from your scalp. Examination of the surgical specimen revealed that the entire melanoma had been excised.

To summarize, this means you do have a diagnosis of a scalp melanoma of low risk, due to its depth of invasion. The surgical excision that you underwent is most often curative. The lymph node that was removed did not show any cancer, indicating it had not spread. Therefore, the only additional treatment you need is surveillance to make sure the cancer does not recur.

I will enclose the copies of my letters dated 12/8/04 and 11/16/04. I hope this will clarify your medical situation.

Sincerely,

Pramod K. Sharma, MD, FACS Assistant Professor

Enclosures

PKS:ec

All Correspondence to:

University of Utah School of Medicine 30 North 1900 East Salt Lake City, Utah 84132 Fax (801) 585-5744 Primary Children's Medical Center 100 North Medical Drive, Suite 4500 Salt Lake City, Utah 84113 Fax (801) 588-3982 University of Utah Hospitals and Clinics Salt Lake City, UT

Letter

JONES, ROBERT - 05051255

Result Type:

Letter

Service Date:

November 16, 2004 12:00 AM

Result Status: Result Title: Unauth LET

Authored By:

Sharma, Pramod Kumar on November 16, 2004 12:00 AM

LET

Provider: SHARMA, PRAMOD, KUMAR

`

November 16, 2004

Dr. Tubbs Utah State Prison Department of Corrections PO Box 250 Draper, Utah 84020

RE:

Robert Jones

ENT:

89689

05051255

Dear Dr. Tubbs,

I had the pleasure of seeing Robert Jones today in consultation. Mr. Jones is a 42 year old male with a history of a scalp lesion. He underwent a biopsy on approximately 9/17/04. This was evaluated and there was a question as to whether this was a benign or malignant lesion. Examination at the Dermopathology Laboratory at the University of Utah School of Medicine confirms this to be a malignant melanoma, with invasion to at least 0.75 mm. The patient denies any family history of malignant melanoma. His past medical history is significant for chronic back pain, with a history of a diskectomy for a herniated disk. He smokes approximately one-half pack a day for 25 years. He no longer consumes alcohol products.

Physical Examination: Evaluation of the scalp reveals a raised oval lesion that is approximately 1.5 cm. in diameter in the vertex on the right side of midline. There are no other abnormalities of the scalp. Palpation of the neck reveals no lymphadenopathy. The remainder of the head and neck examination was essentially normal.

In summary, Mr. Jones has a malignant melanoma of at least 0.75 mm. thickness, without ulceration (deep margin positive). This lesion represents a probable intermediate risk and therefore I have recommended lymphoscintigraphy to identify sentinel node, with sentinel node biopsy. I have also recommended wide local excision with 2 cm. margins and a split thickness skin graft. I have explained the procedure in detail to the patient including all risks and benefits and he has consented. This will be scheduled in the near future.

Thank you for allowing me to be involved in the care of this patient. I will keep you informed as to his progress.

Printed by: Printed on:

Cervantes, Mary Elena 4/13/2006 4:40 PM

Page 1 of 2 (Continued)

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 51 of 54

University of Utah Hospitals and Clinics Salt Lake City, UT

Letter

JONES, ROBERT - 05051255

Sincerely,

Pramod K. Sharma, MD, FACS Assistant Professor

PKS:ec

Printed by: Printed on: Cervantes, Mary Elena 4/13/2006 4:40 PM

Page 2 of 2 (End of Report)

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 52 of 54

University of Utah Hospitals and Clinics Salt Lake City, UT

Letter

JONES, ROBERT - 05051255

Result Type:

Letter

Service Date:

December 08, 2004 12:00 AM

Result Status: Result Title:

Unauth LET

Authored By:

Sharma, Pramod Kumar on December 08, 2004 12:00 AM

LET

Provider: SHARMA, PRAMOD, KUMAR

December 8, 2004

Dr. Tubbs Utah State Prison Department of Corrections PO Box 250 Draper, Utah 84020

RE: ENT: Robert Jones

NT: 89689

MRN:

05051255

Dear Dr. Tubbs,

I had the pleasure of seeing Robert Jones today in follow up. Mr. Jones is a 42 year old male with a history of a scalp melanoma. He underwent wide local excision with split thickness skin graft reconstruction and a sentinel node biopsy on 12/2/04. He has done well since that time and has no complaints today.

Physical Examination: Evaluation of the scalp reveals the bolster to be in good position. This was removed without difficulty and examination reveals 100% take of the graft. Examination of the neck reveals the sentinel node biopsy site to be well healed. The remainder of the head and neck examination was essentially normal.

Pathology: Final histopathology reveals negative margins of the primary site. Examination of the sentinel node reveals no evidence of malignant melanoma.

In summary, Mr. Jones is currently doing well and is recovering nicely from his recent surgery. I have asked him to return to see me in six months for cancer surveillance.

Thank you for allowing me to be involved in the care of this patient. I will keep you informed as to his progress.

Sincerely,

Pramod K. Sharma, MD, FACS

Printed by:

Cervantes, Mary Elena

Printed on: 4/13/

4/13/2006 4:40 PM

Page 1 of 2 (Continued)

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 53 of 54

University of Utah Hospitals and Clinics Salt Lake City, UT

Letter

JONES, ROBERT - 05051255

Assistant Professor

PKS:ec

Printed by: Printed on: Cervantes, Mary Elena 4/13/2006 4:40 PM

ry Elena Page 2 of 2 PM (End of Report)

Case 2:06-cv-00527-DAK Document 3 Filed 06/30/06 Page 54 of 54

SIS 44 (Rev. 11/04)

CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON THE REVERSE OF THE FORM.)

I. (a) PLAINTIFFS	ROBERT ELLIS JONES	DEPART	LENTATE OF U LENTAPURIORRI LIE PRISON /	ECTIONS			
(b) County of Residence		County of Residence of	nFindstLjeAed Moofengiant	MEDICAL DEPT.			
(E	XCEPT IN U.S. PLAINTIFF CASES)						
ROBERT E	Address, and Telephone Number) PRO SE LLIS JONES U.S.P. #183 250 DRAPER, UTAH 8402	·	TYCLERA	JUN 2 6 2006			
II. BASIS OF JURISD	PICTION (Place an "X" in One Box Only)	III. CITIZENSHIP OF P	RINCIPAL PARTES	(PUSTRICT COURT intiff			
☐ 1 U.S. Government Plaintiff	U.S. Government Not a Party)		TF DEF (1				
☐ 2 U.S. Government Defendant	☐ 4 Diversity (Indicate Citizenship of Parties in Item III)	Citizen of Another State	2 D 2 Incorporated and I of Business In A	Another State			
		Citizen or Subject of a T Foreign Country	3 G 3 Foreign Nation	П6 П6			
IV. NATURE OF SUIT							
CONTRACT ☐ 110 Insurance ☐ 120 Marine ☐ 130 Miller Act ☐ 140 Negotiable Instrument ☐ 150 Recovery of Overpayment & Enforcement of Judgment ☐ 151 Medicare Act ☐ 152 Recovery of Defaulted Student Loans (Excl. Veterans) ☐ 153 Recovery of Overpayment of Veteran's Benefits ☐ 160 Stockholders' Suits ☐ 190 Other Contract ☐ 195 Contract Product Liability ☐ 196 Franchise REAL PROPERTY ☐ 210 Land Condemnation ☐ 220 Foreclosure ☐ 230 Rent Lease & Ejectment ☐ 240 Torts to Land ☐ 245 Tort Product Liability ☐ 290 All Other Real Property	PERSONAL INJURY 310 Airplane Product Liability 320 Assault, Libel & Slander 330 Federal Employers' Liability 340 Marine 345 Marine Product Liability 350 Motor Vehicle Product Liability 350 Motor Vehicle Product Liability 350 Motor Vehicle Product Liability 360 Other Personal Injury Product Liability PERSONAL PROPER 370 Other Fraud 371 Truth in Lending 380 Other Personal Property Damage Product Liability 360 Other Personal Injury CIVIL RIGHTS PRISONER PETITION 441 Voting 442 Employment 443 Housing/ Accommodations 444 Weifare 445 Amer. w/Disabilities Employment 446 Amer. w/Disabilities Other Other 440 Other Civil Rights	G20 Other Food & Drug	BANKRUPTCY 422 Appeal 28 USC 158 423 Withdrawal 28 USC 157 PROPERTY RIGHTS 820 Copyrights 830 Patent 840 Trademark SOCIAL SECURITY 861 HIA (1395ff) 862 Black Lung (923) 863 DIWC/DIWW (405(g)) 864 SSID Title XVI 865 RSI (405(g)) FEDERAL TAX SUITS 870 Taxes (U.S. Plaintiff or Defendant) 871 IRS—Third Party 26 USC 7609	OTHER STATUTES □ 400 State Reapportionment □ 410 Antitrust □ 430 Banks and Banking □ 450 Commerce □ 460 Deportation □ 470 Racketeer Influenced and □ Corrupt Organizations □ 480 Consumer Credit □ 490 Cable/Sat TV □ 810 Selective Service □ 850 Securities/Commodities/ □ Exchange □ 875 Customer Challenge □ 12 USC 3410 □ 890 Other Statutory Actions □ 891 Agricultural Acts □ 892 Economic Stabilization Act □ 893 Environmental Matters □ 894 Energy Allocation Act □ 895 Freedom of Information Act □ 900Appeal of Fee Determination Under Equal Access to Justice □ 950 Constitutionality of State Statutes			
V. ORIGIN (Place an "X" in One Box Only) The proceeding Proceeding State Court (Place an "X" in One Box Only) Remanded from Appellate Court Appellate Court Appellate Court Appellate Court Transferred from another district (specify) (specify) Appeal to District Judge from Multidistrict (specify) Judge from Multidistrict Litigation Judgment							
VI. CAUSE OF ACTION	ON Cite the U.S. Civil Statute under which you as H2 U.S. SEC Brief description of cause: PERMAN	110N 1983	UREMENT				
VII. REQUESTED IN COMPLAINT:	CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23		CHECK YES only	if demanded in complaint:			
VIII. RELATED CASI IF ANY	E(S) (See instructions): JUDGE		DOCKET NUMBER				
DATE 2 JUNE,		TORNEY OF RECORD EUGA JONES PR	058				
	/						
RECEIPT#A	ות י	dge Dale A. Kimbal ECK TYPE: Civil ATE STAMP: 06/30/20		· ·			

CASE NUMBER: 2:06CV00527 DAK